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| APPLICATION NO.                                         | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |  |
|---------------------------------------------------------|-------------|----------------------|---------------------|------------------|--|
| 10/069,754 02/28/2002 Roger W. Whatmore 7590 10/12/2004 |             | Roger W. Whatmore    | 112113              | 3781             |  |
|                                                         |             | EXAMINER             |                     |                  |  |
| Oliff & Berridge<br>PO Box 19928                        |             |                      | ALANKO, ANITA KAREN |                  |  |
| Alexandria, VA 22320                                    |             |                      | ART UNIT            | PAPER NUMBER     |  |
|                                                         |             |                      | 1765                |                  |  |

DATE MAILED: 10/12/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

## **Advisory Action**

| Application No. | Applicant(s)    |  |  |
|-----------------|-----------------|--|--|
| 10/069,754      | WHATMORE ET AL. |  |  |
|                 | 0 4 11 74       |  |  |
| Examiner        | Art Unit        |  |  |

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

THE REPLY FILED 28 September 2004 FAILS TO PLACE THIS APPLICATION IN CONDITION FOR ALLOWANCE. Therefore, further action by the applicant is required to avoid abandonment of this application. A proper reply to a

| condit                        | rejection under 37 CFR 1.113 may <u>only</u> be either: (1) a t<br>tion for allowance; (2) a timely filed Notice of Appeal (w<br>nination (RCE) in compliance with 37 CFR 1.114.                                                                                                                                                                    | timely filed a<br>with appeal f                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | amendment whicee); or (3) a time                  | ch places the application in<br>ely filed Request for Continued                          |
|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------------------------------------------|
|                               | PERIOD FOR REPLY                                                                                                                                                                                                                                                                                                                                    | [check eith                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | er a) or b)]                                      |                                                                                          |
| a) [                          | $\boxtimes$ The period for reply expires <u>3</u> months from the mailing date of the f                                                                                                                                                                                                                                                             | inal rejection.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   |                                                                                          |
| b) [                          | event, however, will the statutory period for reply expire later than \$1. ONLY CHECK THIS BOX WHEN THE FIRST REPLY WAS FILEI 706.07(f).                                                                                                                                                                                                            | X MONTHS fro<br>D WITHIN TW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | m the mailing date of<br>O MONTHS OF THE          | the final rejection.<br>EFINAL REJECTION. See MPEP                                       |
| have be<br>37 CFR<br>(b) abov | Attentions of time may be obtained under 37 CFR 1.136(a). The date on the date is the date for purposes of determining the period of extension at 1.17(a) is calculated from: (1) the expiration date of the shortened stature, if checked. Any reply received by the Office later than three months a patent term adjustment. See 37 CFR 1.704(b). | nd the correspondence in the correction of the c | onding amount of the<br>reply originally set in t | fee. The appropriate extension fee under the final Office action; or (2) as set forth in |
| 1.                            | A Notice of Appeal was filed on Appellant's Bri<br>37 CFR 1.192(a), or any extension thereof (37 CFR 1.                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   |                                                                                          |
| 2.🛛                           | The proposed amendment(s) will not be entered becau                                                                                                                                                                                                                                                                                                 | ıse:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                   |                                                                                          |
| (a                            | a) X they raise new issues that would require further co                                                                                                                                                                                                                                                                                            | onsideration                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | and/or search (                                   | see NOTE below);                                                                         |
| •                             | b) they raise the issue of new matter (see Note below                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | `                                                 | •                                                                                        |
| (C                            | they are not deemed to place the application in be issues for appeal; and/or                                                                                                                                                                                                                                                                        | etter form fo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | r appeal by mate                                  | erially reducing or simplifying the                                                      |
| (d                            | f)  they present additional claims without canceling a                                                                                                                                                                                                                                                                                              | a correspon                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ding number of t                                  | finally rejected claims.                                                                 |
|                               | NOTE: the new issue for consideration is the new lim                                                                                                                                                                                                                                                                                                | itation added                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | to claim 1.                                       |                                                                                          |
| 3.                            | Applicant's reply has overcome the following rejection                                                                                                                                                                                                                                                                                              | (s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                   |                                                                                          |
| 4.                            | Newly proposed or amended claim(s) would be a canceling the non-allowable claim(s).                                                                                                                                                                                                                                                                 | allowable if                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | submitted in a s                                  | eparate, timely filed amendment                                                          |
| 5.                            | The a) affidavit, b) exhibit, or c) request for recapplication in condition for allowance because:                                                                                                                                                                                                                                                  | consideratio                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | n has been cons                                   | idered but does NOT place the                                                            |
| 6.                            | The affidavit or exhibit will NOT be considered becaus raised by the Examiner in the final rejection.                                                                                                                                                                                                                                               | e it is not di                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | rected SOLELY                                     | to issues which were newly                                                               |
| 7.🛛                           | For purposes of Appeal, the proposed amendment(s) a explanation of how the new or amended claims would                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   |                                                                                          |
|                               | The status of the claim(s) is (or will be) as follows:                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   |                                                                                          |
|                               | Claim(s) allowed:                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   |                                                                                          |
|                               | Claim(s) objected to:                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   |                                                                                          |
|                               | Claim(s) rejected: <u>1-4, 6-13, 15-25</u> .                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   |                                                                                          |
|                               | Claim(s) withdrawn from consideration:                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   |                                                                                          |
| 8.                            | The drawing correction filed on is a) approve                                                                                                                                                                                                                                                                                                       | ed or b)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | disapproved by                                    | the Examiner.                                                                            |
| 9. 🗌                          | Note the attached Information Disclosure Statement(s)                                                                                                                                                                                                                                                                                               | ( PTO-1449                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ) Paper No(s)                                     |                                                                                          |
|                               | Other:                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   |                                                                                          |
|                               |                                                                                                                                                                                                                                                                                                                                                     | # ***                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | om salvin<br>Morales<br>Morales                   | Anita K. Hanko<br>Anita K Alanko<br>Primary Examiner<br>Art Unit: 1765                   |
|                               |                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                   | 7 11 CHIL. 17 00                                                                         |

U.S. Patent and Trademark Office PTOL-303 (Rev. 11-03)